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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	ATTORNEY DOCKET NO.		EY DOCKET NO.	CONFIRMATION NO.
10/787,233	10/787,233 02/27/2004		James F. McBride		12013/52003		4802
TITLE OF INVENTION	I: TEMPERATURE CO	NTROLLED SOLUTE D	ELIVERY SYSTEM				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0		\$1740	07/01/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS				
HENLEY III, RAYMOND J		1614	424-488000				
"Fee Address" inc PTO/SB/47; Rev 03- Number is required. 3. ASSIGNEE NAME A	condence address (or Cha B/122) attached. dication (or "Fee Address 02 or more recent) attack LND RESIDENCE DAT.	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type)					
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has bee recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							ocument has been filed for
BOSTON SCIENTIFIC SCIMED, INC. Maple Grove, MN							
Please check the appropr	riate assignee category or	r categories (will not be p	rinted on the patent): \Box	Individual 🛚 C	orporation	or other private gro	up entity 🚨 Government
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5. Change in Entity Sta	atus (from status indicate ns SMALL ENTITY stat		☐ b. Applicant is no lo	nger claiming SMA	LL ENTIT	'Y status. See 37 CF	FR 1.27(g)(2).
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